

CLAIMS ONLY						Application Number	Filing Date	
						10650588		
						Applicant(s)		
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend		
1	7	1	1	1		51		
2	1	1	1	1		52		
3						53		
4						54		
5						55		
6						56		
7						57		
8	7	1	1	1		58		
9	1	1	1	1		59		
10						60		
11						61		
12						62		
13						63		
14						64		
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43						93		
44						94		
45						95		
46						96		
47						97		
48						98		
49						99		
50						100		
Total Indep	2	2				Total Indep		
Total Depend	7	13				Total Depend		
Total Claims	9	15				Total Claims		